

Federal Deposit Insurance Corporation
EXPERT INVOICE FOR FEES AND EXPENSES (EIF&E)

MATTER NUMBER	MATTER CAPTION
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SECTION I – FIRM AND INSTITUTION INFORMATION

INSTITUTION NUMBER	FINANCIAL INSTITUTION NAME		
	CITY	STATE	
FEDERAL TAX ID NUMBER	EXPERT FIRM NAME		ADDRESS
	CITY	STATE	ZIP CODE
EXPERT FIRM CONTACT			TELEPHONE NUMBER
EXPERT FIRM ACCOUNTS RECEIVABLE CONTACT			TELEPHONE NUMBER
FDIC OFFICE LOCATION	FDIC ATTORNEY	TELEPHONE NUMBER	
TOTAL EXPERT HOURS BILLED		TOTAL NON-EXPERT HOURS BILLED	

SECTION II – CURRENT BILLING INFORMATION

INVOICE NUMBER	BILLING PERIOD DATE (MM/DD/YYYY)	
	FROM:	THROUGH:
MATTER PHASE	FEES BILLED	EXPENSES BILLED
Phase I	\$	\$
Phase II	\$	\$
Phase III	\$	\$
Phase IV	\$	\$
Phase V	\$	\$
Total Experts' Fees Billed (All Phases)		\$
Total Non-Experts' Fees Billed (All Phases)		\$
SUBTOTAL: Fees Invoiced (All Phases)		\$
SUBTOTAL: Expenses Invoiced (All Phases)		\$
INVOICE GRAND TOTAL		\$

SECTION III – WOMEN & MINORITY/EXPERT PARTICIPATION

CLASSIFICATION	MALE (Current billing, fees only)	FEMALE (Current billing, fees only)
Non-Minority	\$	\$
Asian American	\$	\$
Black American	\$	\$
Hispanic American	\$	\$
Native American	\$	\$

I certify that the information contained herein is true and correct to the best of my knowledge and belief, and that all charges for legal services and disbursements reflected herein are in accordance with our retention agreement with the FDIC Legal Division.

NAME AND TITLE OF EXPERT (Print or type)	AUTHORIZED SIGNATURE	DATE
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